

Post Deployment Preventive Medicine Briefing

CFLCC Surgeon

(Coalition Forces Land Component Command)



Prepared by:

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Post Deployment Briefing Outline

- Purpose of this briefing
- Background on health concerns
- Potential health hazards in this region
- Post deployment requirements
- Summary of topics covered
- How to get more information



Purpose of this briefing

To address health concerns you may have and inform you of the Post-Deployment Health Requirements.



Background

- Recent historical examples of health impact on military readiness:
 - 1991 Desert Storm/Desert Shield
 - 1994 Uphold Democracy-Haiti
 - 1995-96 Bosnia deployments
- Over 300,000 US and Coalition Forces are re-deploying from Iraq and Kuwait in support of Operation Iraqi Freedom.
- Of utmost importance is force health protection and addressing any concerns you might have regarding your health.

Health Threats in Kuwait and Iraq

- DiseaseCategories
 - -Infectious
 - -Vector borne
 - Animal associated
 - Environmental

- Diarrheal diseases
- Tuberculosis
- Malaria
- Dengue
- Meningococcal Meningitis
- Leishmaniasis
- Q-Fever
- Rabies
- Sandfly Fever
- Schistosomiasis
- Typhoid/Paratyphoid
- Typhus
- Boutonneuse Fever
- West Nile Fever
- Leptospirosis

Infectious Diseases

- The most commonly reported health problems in theater:
- Upper respiratory illness
- Diarrhea
- Other less common infectious diseases are covered on the PD Health web site (www.pdhealth.mil/)

Upper Respiratory Illness

- Can be caused by a number of different things, viruses, bacteria, dust particles
- Contributing factors are close living quarters, variation in sleep routine, stress, change in hygiene habits
- Symptoms should resolve in a few days

Diarrheal Diseases

- Major cause of illness
 - Caused by bacteria, viruses, or parasites
 - Can occur with other diseases such as malaria
- Symptoms
 - Usually rapid onset diarrhea
 - Can last more than 2 wks
- Incubation period varies- hours to weeks

Diarrheal Diseases

- It is normal for almost everyone to have some gastrointestinal disturbances during deployment due to changes in diet and eating habits
- The risk of contracting an infectious agent is greatly reduced if you do not eat on the economy. <u>Eat only</u> <u>from US government approved sources</u>
- If you are currently experiencing diarrhea symptoms (loose watery stools, more than 3X per day), see a health care provider

STDs & Bloodborne Diseases

- HIV/AIDS
- Gonorrhea
- Chlamydia
- Syphilis
- Hepatitis

You are not at risk for STDs if you abstain from sexual contact while deployed

Vector-borne diseases: Malaria

- Blood parasite transmitted by mosquitoes
 - Many Iraqis infected
- Symptoms
 - Incubation period: 8-14 days
 - Symptoms: fever, flu-like illness, chills, headache, muscle aches, and fatigue
 - Can be fatal
- It is CRITICAL that you take all anti-malarial medication exactly as prescribed



Vector-borne diseases: Leishmaniasis

- A protozoal parasite transmitted by sand fly bites
 - Highest risk from dusk to dawn
- Symptoms
 - Skin form sores in nose, mouth, and throat
 - Internal form fever, weight loss, anemia, swelling of spleen and liver, possibly fatal
- Countermeasures Prevent sand fly bites
 - Use treated uniforms, Deet, bed nets

Sand flies are very small - only one-third the size of mosquitoes.

Animal Associated Diseases

- Naturally occurring Anthrax
 - Rabies
- Refer to PDHealth for more information on other animal associated diseases

Anthrax (Naturally Occurring)

- Bacteria transmitted by animals or contaminated meat
 - Livestock or wildlife (camels)
 - Increased risk during droughts
- Symptoms
 - Skin form starts as a bump blister ulcer, swelling, and fever
 - Intestinal form nausea, vomiting, fever, and abdominal pain
 - Inhalation form fever, cough, chest discomfort, muscle aches, respiratory distress and death
- Prevention: avoid animal contact
 - Eat only food approved by the U.S. military
 - Bivouac away from livestock and wildlife

Rabies

- The wild dogs roaming troop areas in Kuwait and Iraq could be carrying rabies
- Caused by virus in the saliva of infected mammals or bats
- Rabies is 100% fatal if untreated
- Prevention: avoid animal contact
 - Report animal bites or scratches!
 - Post-exposure treatment must be started immediately

Environmental Threats

- Environmental assessments conducted at all base camps in Kuwait
- Radiation surveys: no health hazard detected
- Air, soil and water analyzed for pesticides, chemicals and heavy metals
- Results: No harmful chemicals in air, soil or water; Particulate matter (dust) levels are a moderate hazard
- Smoke from oil well fires not a health hazard

Homecoming Stress: Reunion with family and friends

- Reunion is a part of the deployment cycle and can be filled with both joy and stress.
- Chaplains and counselors are available to help cope with homecoming stress



Post Deployment Requirements

- Complete Post-Deployment Health Assessment (DD FORM 2796)
- Receive post-deployment preventive medicine briefing
- Receive post-deployment medical screening, testing, and follow-up
- Continue malaria medication

Post Deployment Health Assessment Form

Principal Purp	0 U.S.C. 136 Chapter 55. oose: To assess your state of military healthcare providers	of health after deploy	ment outside	the United Stat	es in support	of military operations
Routine Use:	To other Federal and State and treatment.					
Disclosure: (comprehensiv	Military personnal and DoD ve care may not be possible.	civilian Employees O	nly) Voluntary	. If not provide	d, healthcare	WILL BE furnished, bu
INSTRUCTION	NS: Please read each quest for each question. If					ovide a response
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Female	O Army	O National Guard		Date of depart	ture from thea	iter (dd/mm/yyyy)
	O Coast Guard	O Reserves		TT / [17/	
	O Marine Corps O Navy	O Civilian Governm	ent Employee		/	
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Europe	O Australia	O South America		O E3	O 003	O w3
SW Asia	O Africa	O North America		O E4	O 004	O W4
SE Asia	O Central America	O Other		O E5	O 005	O W5
Asia (Other)	O Unknown			O E6	O 006	0
				O E8	O 007 O 008	O Other
o what areas	were you mainly deployed:			O E9	O 009	
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Qatar			O Turkey			
Afghanistan			O Uzbekista	n		
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MOS, NEC or	AFSC)			000	Medical threat of	Sebriefing completed
				000		tion sheet distributed
Combat specia	alty:			000	Post Deploymen	nt serum specimen collected
						33348

1. Did	d your health o	change	during this deployment?		d you receiv		ccinations just before ent?		
O Health stayed about the same or got better O Health got worse 2. How many times were you seen in sick call during this deployment? No. of times				00000	Smallpox (leaves a scar on the arm) Anthrax Botulism Typhoid Meningococcal Other, list: Don't know None				
			one or more nights in a ring this deployment?		d you take a		following medications		
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	vo Yes, reason/date	187					nide) nerve agent pill		
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ta KCC									
No	Yes During	Yes No	-0.000	No	Yes Durin		Elm-encl		
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0	0	0	Runny nose	0	0		Dizziness, fainting, light headedness		
0	0	0	Fever	0	0		Difficulty breathing		
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0	0	0	Headaches	0	0	0			
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Post Deployment Health Assessment Form

fright		horrible,	or upse	rience that was so tting that, IN THE	15.		ny days did you wear over garments?	No. of days
No	Yes							
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0	0			o think about it or went out of pid situations that remind you			ask because of alerts and se of exercises?	No. of times
0	0	Were a	constantly d?	on guard, watchful, or easily				
0	0		mb or der	tached from others, activities, sings?	17		or did you enter or closel nilitary vehicles?	y inspect any
				7.0		O No	O Yes	
3. Are y	ou havi	ng thou	ghts or o	concerns that				
No	Yes	Unsure			18		k you were exposed to an	
0	0	0	with you	y have serious conflicts ur spouse, family members, friends?		deployment		nts during th
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0	0)	0	Flea or tick collars		200		
0	C)	0	Pesticide strips				
0	()	0	Smoke from oil fire				
0	C)	0	Smoke from burning trash or	feces			
0	C)	0	Vehicle or truck exhaust fume				
0	0)	0	Tent heater smoke				
0	0)	0	JP8 or other fuels				
0	0)	0	Fog oils (smoke screen)				
0	C)	0	Solvents				
0	C)	0	Paints				
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O	()	0	Other exposures				

m . m	MEMBER'S SOCIAL SECURIT	Y #		
Post-Deployment Health Care Provider	Review, Interview, and A	Assessment		
Interview				
1. Would you say your health in general is	4)	O Excellent O Very Good O Good	O Fair	O Poor
2. Do you have any medical or dental prot	olems that developed during t	his deployment?	O Yes	O No
3. Are you currently on a profile or light di	uty?		O Yes	O No
 During this deployment have you sough health? 	at, or do you now intend to se	eek, counseling or care for your mental	O Yes	O No
 Do you have concerns about possible e your health? Please list concerns: 	xposures or events during thi	is deployment that you feel may affect	O Yes	O No
Do you currently have any questions or Please list concerns:	concerns about your health?		O Yes	O No
		orm, there is a need for further evaluation as indic documentation of the problem evaluation to be pi		
member's medical record.) REFERRAL INDICATED FOR: None	O GI	EXPOSURE CONCERNS (During	deployme	ent):
O Cardiac	O GU	O Environmental		
		O Occupational		
O Combat/Operational Stress Reaction	O GYN	O Occupational		
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O Dental O Dermatologic O ENT O Eye O Family Problems	Mental Health Neurologic Orthopedic Pregnancy	O Combat or mission re	lated	
Dental Dermatologic ENT Eye Family Problems Fatigue, Malaise, Multisystem complaint	Mental Health Neurologic Orthopedic Pregnancy Pulmonary	O Combat or mission re	lated	
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Combat/Operational Stress Reaction Dental Dermatologic ENT Eye Family Problems Fatigue, Malaise, Multisystem complaint Audiology Comments:	Mental Health Neurologic Orthopedic Pregnancy Pulmonary	O Combat or mission re	lated	
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Dental Dermatologic ENT Eye Family Problems Fatigue, Malaise, Multisystem complaint Audiology	Mental Health Neurologic Orthopedic Pregnancy Pulmonary Other	O Combat or mission re	(T-1000-1)	56

Post Deployment Health Assessment Form

- DD Form 2796 <u>must</u> be completed prior to departing for home station*
- Side 1 Administrative information
 - Deployment location
 - Country, list all
 - Operation Iraqi Freedom

^{*}or within 5 days of redeployment to home station

Post Deployment Health Assessment Form

- Side 2 Health Assessment
 - Answer as to how you are feeling today
 - Please indicate if you have questions or concerns
 - -Signature verifies who completed the form

Preventive Measures Required

- Tuberculosis Test
 - A skin test on the forearm to indicate if you have been exposed to tuberculosis



- Date will be indicated on your DD 2796
- You must return 48 hours after the skin test to have it read by a health care provider

Malaria Medication

- Complete all malaria medication
 - Continue daily Doxycycline for 4 weeks after departure
 - If on Mefloquine or Chloroquine, continue weekly for 4 weeks after departure
 - Begin Primaquine on day of departure, 15 mg per day for 14 days, unless G-6PD deficient*
 - For 2 weeks after deployment you will be taking Primaquine plus your primary anti-malaria medication; G-6PD individuals see your physician
 - Failure to complete malaria medication can result in malaria infection after deployment

Blood Donation

- If you get malaria you will be deferred from donating blood for 3 years
- Members who have been to malarious areas (Iraq), cannot donate blood for 1 year after departing the area and after stopping malaria medication.



 If you have taken malaria medication and did not travel you will be not deferred from donating blood.

Directions for post-deployment health questions and concerns

Step 1

 Contact your local MTF for problems, questions, or concerns noticed after re-deployment.

Step 2

If you feel ill, your primary health care provider can do an initial assessment. If symptoms persist or your condition is not improving, you will be referred to a specialist.

Step 3

 The DoD Deployment Health Care Center is always available to answer your questions

DoD Deployment Health Care Center

Walter Reed Army Medical Center 6900 Georgia Avenue, NW Building 2, Room 3G04 Washington, DC 20307-5001

Phone: (202) 782-6563

Fax: (202) 782-3539

Toll Free Help Line: (866) 559-1627

http://www.pdhealth.mil

Department of Defense Post-Deployment Health (PDHealth.mil) site